APPLICATION FOR THE

2014 GLOBAL UNDERGRADUATE EXCHANGE PROGRAM (GLOBAL UGRAD)

APPLICATION DEADLINE: November 7, 2013

On-line applications must be submitted to RangoonUSECA@State.gov.

Hard copies must be sent to Cultural Affairs Unit, Public Affairs Section, U.S. Embassy, 110 University Ave, Kamayut Township, Yangon; or The American Center, 14 Tawwin St., Dagon Township, Yangon.

A program of the Bureau of Educational and Cultural Affairs U.S. Department of State



Please provide all answers in English. Please use a paper/binder clip to hold application materials together. Do not staple.

NAME Please print your name of	clearly exactly as it appears	s on your passport.		
Last		First	Middle	
Please indicate any othe	r spelling(s) or name(s) you		o photocopies of a Passport-size (2 x 2 inches re. Please use photocopies, not original pictu	
HOME COUNTRY CO	ONTACT INFORMATIO	ON		
Permanent mailing addr	ess in your home country:			
Street:				
Mailing: (if different, e.	g. PO Box)			
City:				
Country:				
E-mail address:				
Home telephone:		Mobile telephone:		
If your street address (e.g. 200 meters from) is	s different from your mailing	g address (e.g. PO Box), please provide both	h.
	ND PASSPORT MATER Female Date of Bi		ce:	
Country of permanent le			City Country of citizenship:	
Please provide a clear	photocopy of the photo/da	ata info page of your current	t Passport.	
	ACT INFORMATION es and contact information of	of individuals who should be r	notified in case of an emergency.	
In the United States :	Name	Relationship to you	Street Address	
	correc	Township to you	S. COLIMAN COS	
City	State ZIP C	Tode Telephone Number	E-mail address	
In your home country:_	Name	Relationship to you	Street Address	
City	State and/or Country	Telephone Number	r E-mail address	



NAME (Please print your name here):			
FIELD OF STUDY			
Academic Major:			
Other Fields of Academic Interests:			
If selected to participate in the Global UGRAD	Program, what courses would you like to take in your major field of study?		
What courses would you like to take outside you	ır major field of study?		
	ent, name your university:		
	Other		
	cember 2012, August 2012 – May 2013)?		
	CTERS I be writing letters of recommendation on your behalf. At least one should be from your who know your academic and personal qualities well.		
1. Name:	Title:		
Mailing address:			
Telephone number:	E-mail address:		
2. Name:	Title:		
Mailing address:			
Telephone number:	E-mail address:		
3. Name:	Title:		
Mailing address:			
Telephone number:	E-mail address:		



NAME (Please print your name here):						
PREVIOUS ACADE Please indicate any sch			onors that you	u have received and th	e year received:	
	te information about al	nrolled. Y	ou must atta	ach official transcrip	tended and, if applicable, ts for undergraduate stu	
Institution Name (No abbreviations)	Institution Location (City, Country)	MM	Attended I/YY – M/YY	Major Field of Study	Degree Received and Date Received*	Grade Point Average**
Primary School:	(City, Country)	From:	To:			
Secondary School:		From:	То:			
Post-Secondary Education: (University)		From:	То:			
the U.S. educational sy to receive it.	r Grade Point Average educational system's educational	you have no (GPA) acc quivalent.	ot yet receive cording to the	ed the degree, please it system used at the in	you the degree. Do <i>not</i> p ndicate the date (month an stitution at which you stu	nd year) you expect
Have you ever been dis	smissed from a school	or universi	ty? 🗌 No	Yes	If yes, please explain why	?:



LANGUAGE PROFICIENCY						
Native language(s):						
Number of years of English study: _	Where	studied:				
Knowledge of foreign languages, inc	cluding English (Rate your abilit	ies as Excellent, Goo	d, or Fair):			
Language Name	Reading Ability	Writing Abili	ty	Speakir	g Ability	
STANDARDIZED ENGLISH TES	ST SCORES					
f you have a TOEFL®, ITP, or othe		nlassa ranort it halo	w Also plassa	include a (copy of the office	
score report or other documentation		e, picase report it belo	w. Also picasc	merude a c	copy of the office	
Test Name	Date taken o	Date taken or to be taken		Score		
TOEFL® ITP						
OTHER						
OTTIEN						
NON-ACADEMIC ACTIVITIES						
Please list other community service,		ral activities in which	you have partic	ipated regi		
wo years. If you were a team reader	council member or other office					
I and and Institution and Con	r, council member or other office	er in any institution of		note that a	as well.	
Location/Institution and Con			activity, please	Dates of MM/Y	Participation Y – MM/YY	
Location/Institution and Cor		er in any institution of	activity, please	Dates of	Participation Y – MM/YY	
Location/Institution and Cor		er in any institution of	activity, please	Dates of MM/Y	Participation Y – MM/YY	
Location/Institution and Cor		er in any institution of	activity, please	Dates of MM/Y	Participation Y – MM/YY	
Location/Institution and Cor		er in any institution of	activity, please	Dates of MM/Y From:	Participation Y – MM/YY To:	
Location/Institution and Cor		er in any institution of	activity, please	Dates of MM/Y From:	Participation Y – MM/YY To:	
Location/Institution and Cor		er in any institution of	activity, please	Dates of MM/Y From:	Participation Y – MM/YY To: To:	
Location/Institution and Cor		er in any institution of	activity, please	Dates of MM/Y From:	Participation Y – MM/YY To: To:	



NAME (Please print your name here):	
PHYSICAL CHALLENGES/DISABILITIES Please describe any physical disabilities you might have. If you require any special equipment or medical treatment as a result of the hysical disabilities, please describe it. This information is gathered for statistical purposes and to ensure appropriate placement. To blobal UGRAD Program does not discriminate on the basis of race, color, religion, sex, national origin, and/or physical disabilities	Γhe
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CAMILY BACKGROUND Clease complete the following regarding your family:	
ather's Name:	
Occupation: Employer:	
None Number of primary school years Number of secondary school years	
☐ Secondary Diploma ☐ Bachelor Degree ☐ Master Degree ☐ Ph.D.	
father's Employeent: Employeed RetiredYear DeceasedYear	ır
Nother's Name:	
Occupation: Employer:	
lighest level of education attained:	
None Number of primary school years Number of secondary school years	
☐ Secondary Diploma ☐ Bachelor Degree ☐ Master Degree ☐ Ph.D.	
Mother's Employeed RetiredYear DeceasedYear	ır
Jumber of siblings in your immediate family: Number of Brothers: Number of Sisters:	
Iow did you find out about the Global UGRAD Program? Please check all that apply.	
☐ The American Embassy Advising Office or other Embassy contact ☐ The Fulbright Commission	
From a friend From a relative From a teacher or professor	
From an advertisement or notice (Please specify the location):	
Other (Please specify how):	



Global Undergraduate Exchange Program (Global UGRAD) 2014 Application Form

A program of the Bureau of Educational and Cultural Affairs, U.S. Department of State

ESSAYS: If you are completing a computer application, please insert your essay responses below the appropriate essay question. If you are completing a paper application, please type your essay responses on separate sheets of paper and attach them to your application.

ESSAY 1: Personal Statement—350 – 500 words, typed.

Please describe yourself and write a clear and detailed description of your academic objectives and the reasons why you wish to pursue them in the USA. Discuss your goals both in terms of your field of study and your own personal development. Describe the type of program you wish to pursue in the USA and how it relates to your academic background and interests and your objectives for the future. The essay is an essential part of the selection process and of your application for placement into an appropriate program. Be sure to include any details that highlight your personality and individuality.

ESSAY 2: Exchange Preparedness-250 - 350 words, typed.

What are your expectations for the UGRAD program? What are your greatest goals for and fears about living in the United States? How will your personal characteristics help you achieve and/or combat these expectations?

ESSAY 3: Please select and answer *one* of the three questions below -250 - 350 words, typed.

- a. What can contribute to this program, university life in the United States, and to your community after you return?
- b. In your opinion what is the greatest challenge that your generation will face? What ideas do you have for dealing with this issue?
- c. How do you think community service benefits local communities? Please describe any experience you have volunteering.

PLACEMENT INFORMATION:

The following information will not be considered in the evaluation of your application. It will only assist in the university placement process should you be selected for the UGRAD program.
Do you smoke? No Yes Are you willing to live with a roommate who smokes? No Yes
What time do you prefer to go to bed? What time do you prefer to wake up?
How would you describe your preferred living environment (organized, quiet, lively, clean, cluttered, etc.)?
How would you describe your preferred study environment (silent, loud, little noise, does not matter, etc)?
Are you willing to live on a co-ed floor (a floor that includes both men and women) or do you prefer a single-gender floor?
What university clubs or extracurricular activities would you like to participate in while in the United States?
Do you have any allergies? No Yes If yes, please list them:
Do you have any dietary restrictions? No Yes If yes, please describe:
Have you ever been convicted of a felony or other crime? No Yes
Have you ever travelled to the United States? If so, please describe the dates, location, and reason for travel.



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GRANT SUSPENSION/TERMINATION/REVOCATION

A grant may be revoked, terminated, or suspended.

Grounds for revocation or termination include, but are not limited to: (1) violation of any law of the United States or the host country; (2) any act likely to give offense to the host country; (3) failure to observe satisfactory academic or professional standards; (4) physical or mental incapacitation; (5) engaging in any unauthorized income-producing activity; (6) failure to comply with the grant's terms and conditions; (7) material misrepresentation made by any grantee in the application form or grant document.

A grant may be suspended if: (1) the grantee ceases to carry out the project or academic program during the grant period; (2) the grantee leaves the host country without authorization of the Commission/post or supervising agency; (3) conditions in the host country require the departure of the grantee for reasons of personal safety or security.

By my signature, I certify that, to the best of my knowledge, the information provided in my application is accurate and complete, and

SIGNATURE

	nd to return to my home country upon completion of my studies in the United States. I also authorize any school or university ave attended or will attend to release my transcripts and any report to the designated placement agency.
Signature	:Date:
CHECK	LIST FOR COMPLETE APPLICATION DOSSIER:
Before su componer	bmitting your application to the address on the front page, please be sure you have included all of the following REQUIRED nts:
	Completed, signed Global Undergraduate Exchange Program application form;
	Essay 1, 350-500 words, typed*;
	Essay 2, 250-350 words, typed*;
	Essay 3, 250-350 words, typed*;
	If you have a passport, please submit a copy of the data/photo page;
	Official transcripts for years of university study (with English translations). Please provide grade equivalences to
	U.S. University grading system (GPA)*;
	Official results of the matriculation exam*;
	Three letters of recommendation from teachers/professors, including one from the candidate's secondary level
	institution (with English translations)*;
	TOEFL®, ITP®, or other standardized English test score report, 500 or higher preferred;
	Two photocopies of passport-size photo.

^{*} All documents should be submitted in plain, A4 sized paper.